Exhibit 300: Capital Asset Summary

Part I: Summary Information And Justification (All Capital Assets)

Section A: Overview & Summary Information

Date Investment First Submitted: 2009-06-30

Date of Last Change to Activities:

Investment Auto Submission Date: 2012-02-27

Date of Last Investment Detail Update: 2012-02-27

Date of Last Exhibit 300A Update: 2012-07-23

Date of Last Revision: 2012-02-27

Agency: 009 - Department of Health and Human Services Bureau: 38 - Centers for Medicare and

Medicaid Services

Investment Part Code: 01

Investment Category: 00 - Agency Investments

1. Name of this Investment: CMS Part B Claims Processing

2. Unique Investment Identifier (UII): 009-000004256

Section B: Investment Detail

 Provide a brief summary of the investment, including a brief description of the related benefit to the mission delivery and management support areas, and the primary beneficiary(ies) of the investment. Include an explanation of any dependencies between this investment and other investments.

The Multi Carrier System (MCS) is a critical component of the Fee For Service (FFS) program, processing millions of Medicare claims a year, supporting Medicare's mission to The MCS is one of the shared systems used to provide quality health care to beneficiaries. process Medicare Part B claims for physician care, durable medical equipment, and other outpatient services nationwide. It interfaces directly with the Common Working File (CWF) MCS meets CMS' core requirements for processing Medicare Part B claims, to include: data collection and validation, claims control, pricing, adjudication, correspondence, on-line inquiry, file maintenance, reimbursement, and financial processing. The FFS claims processing environment is distributed across four claims processing modules and one integrated testing module. The MCS has four quarterly releases that control, implement, and update software changes due to legislative mandates that dictate the amount of payment for services or coverage levels. Additionally, MCS must also implement changes needed to support the Medicare Administrative Contractor (MAC) authority for the Medicare FFS Program. Software changes for the claims processing operations are managed in quarterly releases developed through a change control process that begins with the Medicare Change Control Board (MCCB) review and prioritization of pending requests. The FFS Operations Board approves the quarterly releases with oversight by the FFS Governance Council and manages/integrates

day-to-day operations of the FFS program across CMS. Error-free releases that implement legislative mandates with minimal interruption to processing ensure that beneficiaries receive the correct service and providers receive the correct payment. This investment also includes the Medicare Pt. B Drugs Average Sales Price Reporting Database, an automated, web-based, secure database to allow drug manufacturers to report quarterly drug sales information.

2. How does this investment close in part or in whole any identified performance gap in support of the mission delivery and management support areas? Include an assessment of the program impact if this investment isn't fully funded.

The Multi Carrier Systme (MCS) is a critical component of the Fee For Service (FFS) program, processing millions of Medicare claims a year, supporting Medicare's mission to provide quality health care to beneficiaries. The MCS software directly supports the Improved Financial Performance, as it is an essential component for ensuring that accurate Part B payments are made for medically necessary services and are provided to eligible beneficiaries by qualified providers of care. Not funding MCS would be detrimental to Medicare, causing harmful delays in processing/ payment of Part B claims, reducing the access, availability, and provision of health care services to Medicare beneficiaries.

3. Provide a list of this investment's accomplishments in the prior year (PY), including projects or useful components/project segments completed, new functionality added, or operational efficiency achieved.

The MCS claims processing system implemented four quarterly releases that control, implement, and update software changes due to legislative mandates that dictated the amount of payment for services or coverage levels.

4. Provide a list of planned accomplishments for current year (CY) and budget year (BY).

The MCS claims processing system will implement four quarterly releases that will control, implement, and refresh software due to legislative mandates that dictate the amount of payment for services or coverage levels.

5. Provide the date of the Charter establishing the required Integrated Program Team (IPT) for this investment. An IPT must always include, but is not limited to: a qualified fully-dedicated IT program manager, a contract specialist, an information technology specialist, a security specialist and a business process owner before OMB will approve this program investment budget. IT Program Manager, Business Process Owner and Contract Specialist must be Government Employees.

2010-07-01

Section C: Summary of Funding (Budget Authority for Capital Assets)

1.

Table I.C.1 Summary of Funding									
	PY-1 & Prior	PY 2011	CY 2012	BY 2013					
Planning Costs:	\$0.0	\$0.0	\$0.0	\$0.0					
DME (Excluding Planning) Costs:	\$0.0	\$0.0	\$0.0	\$0.0					
DME (Including Planning) Govt. FTEs:	\$0.0	\$0.0	\$0.0	\$0.0					
Sub-Total DME (Including Govt. FTE):	0	0	0	0					
O & M Costs:	\$47.5	\$17.1	\$17.0	\$17.7					
O & M Govt. FTEs:	\$1.0	\$0.4	\$0.4	\$0.4					
Sub-Total O & M Costs (Including Govt. FTE):	\$48.5	\$17.5	\$17.4	\$18.1					
Total Cost (Including Govt. FTE):	\$48.5	\$17.5	\$17.4	\$18.1					
Total Govt. FTE costs:	\$1.0	\$0.4	\$0.4	\$0.4					
# of FTE rep by costs:	9	3	3	3					
Total change from prior year final President's Budget (\$)		\$-2.7	\$-3.3						
Total change from prior year final President's Budget (%)		-13.60%	-15.81%						

2. If the funding levels have changed from the FY 2012 President's Budget request for PY or CY, briefly explain those changes:

The current funding levels for this investment were developed through the CMS' annual CPIC process. The funding levels for Part B claims processing do not equal the President's Budget because the CMS portfolio has been adjusted to reflect re-evaluated Agency priorities.

Section D: Acquisition/Contract Strategy (All Capital Assets)

	Table I.D.1 Contracts and Acquisition Strategy										
Contract Type	EVM Required	Agency ID	Procurement Instrument Identifier (PIID)	Indefinite Delivery Vehicle (IDV) Reference ID	IDV Agency ID	Solicitation ID	Ultimate Contract Value (\$M)	Туре	PBSA ?	Effective Date	Actual or Expected End Date
Awarded		HHSM500200 500021C									
Awarded		HHSM500200 500001B									
Awarded		HHSM500200 700016I									

2. If earned value is not required or will not be a contract requirement for any of the contracts or task orders above, explain why:

This is a Steady State investment and earned value is not required; however cost and schedule performance data, including variances, are monitored and reported monthly to HHS.

Page 5 / 7 of Section 300 Date of Last Revision: 2012-02-27 Exhibit 300 (2011)

Exhibit 300B: Performance Measurement Report

Section A: General Information

Date of Last Change to Activities:

Section	B: Pro	iect Exe	cution	Data

	Table II.B.1 Projects										
Project ID Project Project Project Project Project Project Project Start Date Completion Lifecycl Date Cost (\$N.											
	NONE										
	Activity Summary										
Roll-up of Information Provided in Lowest Level Child Activities											

Project ID	Name	Total Cost of Project	End Point Schedule	End Point Schedule	Cost Variance	Cost Variance	Total Planned Cost	Count of
		Activities	Variance	Variance (%)	(\$M)	(%)	(\$M)	Activities
		(\$M)	(in days)					

NONE

				Key Deliverables				
Project Name	Activity Name	Description	Planned Completion Date	Projected Completion Date	Actual Completion Date	Duration (in days)	Schedule Variance (in days)	Schedule Variance (%)

NONE

Page 6 / 7 of Section 300 Date of Last Revision: 2012-02-27 Exhibit 300 (2011)

Section C: Operational Data

	Table II.C.1 Performance Metrics								
Metric Description	Unit of Measure	FEA Performance Measurement Category Mapping	Measurement Condition	Baseline	Target for PY	Actual for PY	Target for CY	Reporting Frequency	
The Number of P1 & P2 issues post production	Number	Customer Results - Service Quality	Under target	5.000000	0.000000		0.000000	Quarterly	
Accuracy and technical excellence of contract deliverables and reports based on monthly status report	Percentage	Process and Activities - Management and Innovation	Over target	95.000000	100.000000		100.000000	Monthly	
The percentage of change requests delivered to BETA on schedule	Percentage	Process and Activities - Cycle Time and Timeliness	Over target	95.000000	100.000000		100.000000	Quarterly	
Adherence to budget / cost control discipline (as measured by percent above/below planned budget)	Percentage	Process and Activities - Financial	Under target	10.000000	10.000000		10.000000	Monthly	
The percentage of incidents that were closed timely and efficiently as a result of one help desk interaction	Percentage	Customer Results - Timeliness and Responsiveness	Over target	95.000000	100.000000		100.000000	Quarterly	